



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9009

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------|
| SERIAL NUMBER 10/625,792 | FILING DATE 07/23/2003 RULE | CLASS 250 | GROUP ART UNIT 2878 | ATTORNEY DOCKET NO. 1062/D78 |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------|

APPLICANTS

Marc A. Mandro, Bow, NH;
 Larry B. Gray, Merrimack, NH;

** CONTINUING DATA *****
 This appln claims benefit of 60/398,259 07/24/2002 *yes PL*

** FOREIGN APPLICATIONS ***** *no PL*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 03/18/2004

| | | | | |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>PL</i> | STATE OR COUNTRY NH | SHEETS DRAWING 4 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 3 |
|---|---------------------------|------------------------|-----------------------|----------------------------|

ADDRESS
 2101
 BROMBERG & SUNSTEIN LLP
 125 SUMMER STREET
 BOSTON, MA
 02110-1618

TITLE
 Optical displacement sensor for infusion devices

| | | |
|-----------------------------------|---|---|
| FILING FEE RECEIVED 750 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------------|---|---|